y. Dkt. No. 31890/1613 K *OFFICE* A

Applicant: Carlson et al.

Title:

EMBOSSING SYSTEM

Appl. No.:

Unknown

Filing Date:

Unknown

Examiner:

Unknown

Art Unit:

Unknown

CERTIFICATE OF EXPRESS MAILING

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UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

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Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Christopher Robert Carlson 545 South 56th Avenue, #7 Wausau, Wisconsin 54401

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[] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (14 pages).
- [X] Informal drawings (4 sheets, Figures 1-3).
- [X] Unexecuted Declaration and Power of Attorney (4 pages).
- [] Assignment of the invention to Alterra Holdings Corporation.



- [] **Assignme** ecordation Cover Sheet.
- [] Small Entity statement.
- Request for application not to be published with certification under 35 USC [] 122(b)(2)(B)(i).
- Information Disclosure Statement.
- [] Form PTO-1449 with copies of listed reference(s).
- [] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims	Included in		**	Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee							\$740.00		\$740.00
Total Claims:	32	-	20	=	12	x	\$18.00	=	\$216.00
Independents:	3		3	= '	0	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$2							\$280.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed + \$130.00							=	\$130.00	
							SUBTOTAL:	=	\$1086.00
[] Small Entity Fees Apply (subtract ½ of above):							of above):	=	\$0.00
TOTAL FILING FEE:								=	\$1,086.00

- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1450. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1450.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By Markell 1

Date Meanly 21,2001

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